# Non-Clinical Safety Assessment of Vaccines

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#### **Objectives**

- Regulatory requirements
- Key components in non-clinical evaluation
- Potential safety concerns
- Challenges/goals pertaining to toxicity assessments for vaccines
- CBER approach to toxicity assessment of vaccines
- CT products: Special considerations

#### **Definition of Vaccine**

- "a heterogeneous class of medicinal products containing antigenic substances capable of inducing specific, active and protective host immunity against an infectious agent or pathogen
  - Preventive vaccines
    - Pre- and post-exposure prophylaxis
  - Therapeutic vaccines against infectious disease

### **Regulatory Jurisdiction: Vaccines**

- OVRR/CBER regulates preventive and therapeutic vaccines for infectious disease indications
  - Toxicology review
    - OVRR/CBER
    - CDER consult review

#### Vaccine Regulatory Requirements

- 21 CFR 610 General Biological Product Issues
- Lot release
  - Potency
  - General Safety/Abnormal Toxicity
  - Sterility/Bioburden
  - Purity moisture, pyrogenicity
  - Identity
  - Constituent Materials
    - All ingredients shall meet accepted standards of purity and quality: Certificate of analysis provided to IND
    - Adjuvant may be included if no AE on safety and potency (21 CFR 610.15)

#### Vaccine Regulatory Requirements

- 21 CFR 312 IND regulations
  - 312.23 (a)(7) Chemistry/ Composition, manufacturing and Control Information
    - Assure proper identification, quality, purity and strength of product
    - Stability for the planned duration of trial
  - 312.23(a)(8) Pharmacologic and Toxicologic studies
    - In vivo or in vitro studies to conclude that proposed clinical studies are reasonably safe (GLP)

### **Key Components in Non-clinical Assessment**

- Product characterization
- Manufacturing process
  - Starting materials
  - In-process controls for intermediates
  - Validated process procedures
  - Consistency in manufacture
  - Lot release
    - Adequate specifications
    - Purity, potency, identity
  - Stability
- In vitro studies

- Animal studies
  - Immunogenicity
  - Pyrogenicity testing
  - General safety testing
  - Neurovirulence testing
  - Reversion to virulence
  - Biodistribution studies
  - Integration studies
  - Safety studies
  - Efficacy studies
    - CT products

### Definition: Preclinical & Nonclinical Safety Assessment

- Pre-clinical safety assessment
  - Includes product characterization, proof of concept studies, animal safety testing
  - Prerequisite to the initiation of clinical trials
- Non-clinical safety assessment
  - Preclinical safety assessment plus further product characterization and safety assessments during various stages of clinical product development
    - Includes studies if changes to the product manufacturing and/or formulation are made
    - Evaluates potential safety concerns that may have arisen from Phase 1 and Phase 2 clinical trials

#### **Vaccine Safety:**

- Major Public Concern in Developed Countries
- Majority of vaccines given to healthy individuals
  - Public expects safe (and effective) products, especially vaccines given to healthy individuals (children)
- Perception of risk outweighs perception of benefit
  - For CT products, in emerging event, balance may shift
- Focus on non-clinical safety assessment including toxicity testing

### **Pre-clinical Safety Evaluation: Goals**

- To support entry into clinical trials, where human safety is ultimately evaluated
  - Rare toxicities, or potential effects of sub-populations often only addressable in humans
- Maximize the benefit-to-risk of vaccine development
- Determine a safe dose
- Identify any potential or unknown toxicities, target organs

Broad measures P unpredictable toxicity

Specific assays P key theoretical concerns

### CBER Precedence for Toxicity Studies for Vaccines

- Immunization of pregnant women
- Route of administration
- Novel adjuvants/novel antigens
- Adverse effects observed in clinical trials
  - Potential toxicity of vaccine assessed in nonclinical trials designed to replicate specific clinical events

#### **Potential Safety Concerns**

- Inherent toxicity of the vaccine
- Toxicity of impurities/contaminants
- Toxicity due to interaction of components
- Toxicity linked to the immune response induced

### **Toxicity Assessments of Vaccines: Challenges**

- Vaccines complex, diverse class of biological products
- Act through complex mechanism whereby the product itself is not the final triggering component; elements of the immune system are the effectors
- Challenges:
  - Applicability of drug toxicity testing programs?
  - Applicability of available documents?
  - Timing of toxicity studies?
  - What products?

### **Currently Available Guidance for Toxicity Assessments**

- CPMP Note for guidance on pre-clinical pharmacological and toxicological testing of vaccines, 6/1998
- ICH S6 Pre-clinical safety evaluation of biotechnology-derived Pharmaceutical, 7/1997
- ICH S5a Detection of Toxicity to Reproduction for Medicinal Products, 1994
- US FDA Guidance for Industry: Considerations for Developmental Toxicity Studies for Preventive & Therapeutic Vaccines for Infectious Disease Indications, 2000 (revised)

#### Workshop on Non-clinical Safety Evaluation of Vaccines (December 2&3, 2002)

- Discussions on non-clinical methods for safety assessments of vaccines
  - Animal models
  - Study design (dose, ROA, schedule)
  - Endpoints (parameters evaluated)
  - Alternative methods
- Provided basis for the development of guidance
- http://www.toxicology.org.memberservices/ meetings/cct-vaccines.html

### General Principles of Non-clinical Evaluation of Vaccines

- Risk/benefit
  - Target population
  - Clinical indication
  - Available clinical data
  - ROA
  - Mechanism of action
  - Product features, e.g., novelty
  - Relevant animal models
- USE SCIENTIFIC JUDGMENT!

## General Principles of Non-clinical Evaluation of Vaccines (cont.)

- Adequate to identify/characterize toxic effects
- Need and design based on scientific judgment and best available science
- No one study design for all product categories!
- May not be needed for all products

# General Principles of Non-clinical Evaluation of Vaccines (cont.)

- Need for balance in interpretation of nonclinical data
- Parameters to be considered:
  - Animal species/strain, dosing schedule, dose, ROA, devices, product features
- Evaluation of potential toxic effects:
  - Target organs, dose, routes of exposure, frequency of exposure, reversibility of observed toxic effects

# Non-clinical Lot(s) used in Toxicity Study

- Ideally, same lot as used in clinical study and in compliance with GMP
- If this is not feasible, then preclinical should be comparable to the clinical material with respect to physico-chemical data, stability, formulation, etc
  - Lot release protocol

## Toxicity Assessment: Study Design

- Dedicated stand alone toxicity studies or
- Combination safety/activity study
- Control arms
  - Base line
  - Comparison to test group
  - Reversibility of adverse effects
  - Delayed adverse effects

## **Toxicity Assessment:** ROA/Dosing

- Route of administration (ROA) and dose should corresponded to clinically intended ROA and dose
- Total number of doses equal to or exceed number of clinically administered doses
  - ["N plus 1"]
- Episodic dosing, e.g., weeks between doses

### **Toxicity Assessment: Dose**

- Maximum human dose (1x)
  - In general, no need for dose response
    - Possible Exceptions (e.g., adjuvants)
  - Dose defined by the immune response
  - Volume
    - Same as administered to humans (1x)
    - Scale based on mg/kg, if 1x dose not feasible
    - Don't change formulation

# **Toxicity assessment: Parameters Monitored**

- Local/systemic events
- Immunogenicity
- Clinical observations (general health, body weight and food consumption, injection site, limb use impairment)
- Serum chemistries including liver and renal function tests (ALT, AST, creatine kinase, BUN)
- Hematologic analysis (CBC and differential)
- Injection site histopathology
- Terminal procedures (necropsy, organ description, weights, histopathology on tissue including evaluation of immune organs)
- Good Laboratory Practice (GLP, 21 CFR 58.1)

#### Toxicity Assessment (cont.) Immune Response

- Characterization of the immune response
  - Changes in immune parameters are expected
  - Parameters to be evaluated include white blood cell count, histopathological examination of bone marrow & lymphoid tissue
- Tiered testing approach
  - In some cases specific immune investigations may be necessary
  - Hypersensitivity reactions

### **Toxicity Assessment: Animal Model**

- "Relevant" animal species
  - An animal species susceptible to respond to the test article activity, e.g., development of an immune response after vaccination
    - Ideally, species should be sensitive to the pathogenic organism or toxin
  - One relevant animal species in general sufficient
    - Exceptions on a case-by-case
    - Non-human primates not generally necessary
  - Group size dependent on the animal model

## **Toxicity Assessment: Animal Model (cont.)**

- Additional considerations
  - Recognize limitations of animal model
  - Judicious use of animals
  - Use of naïve vs. partially immune or immune animals
  - Juvenile animal models???
  - Animal validation (e.g., historic control data such as hematological, serum chemistry parameters, pathology, etc.)
- Justify animal model!

## **Special Considerations for Toxicity Assessments (cont.)**

- Adjuvants
  - Demonstrate effect in non-clinical immunogenicity study
  - Evaluate relevant vaccine/adjuvant formulations in preclinical GLP safety studies:
    - Vaccine product with and without adjuvant in preclinical studies
    - Antigen/adjuvant formulation intended for clinical use
  - If novel adjuvant, then safety assessment of adjuvant by itself

## **Special Considerations for Toxicity Assessments**

#### **Developmental Toxicity Studies**

- Considered if product includes females of child bearing potential or pregnant women
- Need for developmental toxicity study will depend on the product
- Restricted to pre- and postnatal developmental studies, no fertility and post-weaning assessment for most vaccine products
- Tiered approach
- CBER guidance revised to reflect this approach

## **Special Considerations for Toxicity Assessments (cont.)**

- Genotoxicity studies: In general not needed
  - Exception adjuvant, excipient (case-by case)
- Carcinogenicty studies: In general not needed
- Safety pharmacology (circulatory/respiratory system): In general not needed, (case-by-case)
- Pharmacokinetic studies: In general not needed
  - Case-by case: novel adjuvants, alternate ROA

### **Timing of Preclinical Toxicity Studies**

- Prior to initiating Phase 1 clinical trials
- Discuss with CBER prior to or during pre-IND meeting
  - Provide adequate information on clinical plan
- Submit toxicity protocols for CBER review <u>prior</u> to initiation of animal studies
  - Avoid additional toxicity studies
- Submit toxicity study report to original IND
  - Full tabulation of data, line listings
  - Safety of clinically intended dose/ROA
- Additional toxicity studies may be necessary as product/clinical development continues

- Expeditious development and licensing of products to treat or prevent outbreaks from exposure to the pathogen identified as bioterrorist agents
- CBER guides products through the regulatory process
  - Manufacturing process, pre-clinical testing, clinical trials and approval process

- Early and frequent communication with sponsor essential
- Need for pre-pre-IND CBER consult
  - Insure quality of toxicity studies
  - Reduce misunderstandings
  - Prevent unnecessary use of animals
  - Expedite initiation of Phase 1 clinical trials
  - Expedite product development

- Significance of pre-clinical assessments:
  - CT product availability under IND
    - Potentially large numbers of healthy individuals
  - Acceptable basic safety data derived from in vivo or in vitro pre-clinical studies
    - Assure no unreasonable risk
  - "Proof-of-concept" studies provide reasonable scientific basis for activity

 Preclinical safety data help provide confidence that risk:benefit ratio favorable enough for timely product access

#### Summary

- Non/pre-clinical safety assessment is a key component in vaccine development
  - Of special significance for CT products
- Case-by-case, science based
- Approach to optimal study and/or toxicity assessment for vaccines evolving
- Emphasis on early communications with sponsor
- Vaccine specific guidance for non-clinical safety assessment of vaccines currently being developed
  - WHO guideline on nonclinical evaluation of vaccines

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